CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed: 5	
3 CANDIDATE / OFFICEHOLDER	MS / MRS / MR FIRST Michelle	MI	OFFICE USE ONLY	
NAME	NICKNAME LAST		Date Received	
	French			
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP CODE		
MAILING ADDRESS	Ponder	TX 76259		
Change of Address				
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER	EXTENSION	Date Hand-delivered or Date Postmarked	
6 CAMPAIGN TREASURER	MS / MRS / MR FIRST Mrs. Mary	MI	Receipt # Amount \$	
NAME	Mrs. Mary		Date Processed	
	Horn	GGITIA	Date Imaged	
7 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE); APT / S		ZIP CODE	
TREASURER ADDRESS		Sanger TX	76266	
(Residence or Business)				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER	EXTENSION		
9 REPORT TYPE	January 15 30th day before of July 15 8th day before ele		15th day after campaign treasurer appointment (Officeholder Only) Final Report (Attach C/OH - FR)	
10 DEDICE				
10 PERIOD COVERED	Month Day Year 07 / 01 / 2018	THROUGH 12	Day Year 31	
11 ELECTION	ELECTION DATE	ELECTION TYPE		
	Month Day Year Primary	Runoff Other Description		
	General	Special		
12 OFFICE	OFFICE HELD (if any)	13 OFFICE SOUGHT (if known	1)	
	Tax Assessor-Collector			
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 2

14 C/OH NAME			15 Filer ID (Ethics Commission Filers)	
Michelle French				
16 NOTICE FROM POLITICAL COMMITTEE(S)	THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.			
	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
	SPECIFIC	COMMITTEE ADDRESS		
Additional Pages		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMI		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$.00	
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED		\$.00	
	4. TOTAL	POLITICAL EXPENDITURES	\$.00	
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST PORTING PERIOD	DAY \$881.68	
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$3,20		\$3,200.00	
18 AFFIDAVIT				
		true and correct and includes all in under Title 15, Election Code 85-E5D3-47E	parjury that the accompanying report is section rectured to be reported by me 8-A1F9-B8AA6 9 - 06:59:17	
		Signature of Car	didate or Officeholder	
AFFIX NOTARY STAMP / SEALABOVE				
Sworn to and subsc	ribed before me, l	by the said	, this the	
day of	, 20,	to certify which, witness my hand and seal of office		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of officer administering oath	

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

19	FILER NAME 20 F	iler ID (Ethics Commission Filers)
21	SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$\$0.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$\$0.00
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$\$0.00
4.	. SCHEDULE E: LOANS	\$\$0.00
5.	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBU	UTIONS \$\$0.00
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$\$0.00
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTR	RIBUTIONS \$\$0.00
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$\$0.00
9.	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$\$0.00
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSIN	NESS OF C/OH \$\$0.00
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIB	UTIONS \$\$0.00
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$\$0.05

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

Th	e Instruction Guide explains how to complete this form.	Total pages Schedule K: 2
2 FILER NAME Michelle Fre		3 Filer ID (Ethics Commission Filers)
4 Date 07/10/2018	5 Name of person from whom amount is received Wells Fargo Bank	8 Amount (\$) \$0.01
	7 Purpose for which amount is received Interest	Check if political contribution returned to filer
Date 08/08/2018	Name of person from whom amount is received Wells Fargo Bank Address of person from whom amount is received; Denton	Amount (\$) \$0.01 State; Zip Code TX 76201
	Purpose for which amount is received Interest	Check if political contribution returned to filer
Date 09/11/2018	Name of person from whom amount is received Wells Fargo Bank Address of person from whom amount is received; Denton	Amount (\$) \$0.01
	Purpose for which amount is received Interest	Check if political contribution returned to filer
Date 11/08/2018	Name of person from whom amount is received Well Fargo Bank Address of person from whom amount is received; Denton	Amount (\$) \$0.01 State; Zip Code TX 76201
	Purpose for which amount is received Interest	Check if political contribution returned to filer
	ATTACH ADDITIONAL COPIES OF THIS SCI	HEDULE AS NEEDED

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form. 1 Total pages Sche 2		dule K:	
2 FILER NAME Michelle Fren	ch	3 Filer ID (Ethics	Commission Filers)
4 Date 12/10/2018	Name of person from whom amount is received Wells Fargo Bank	Zip Code	8 Amount (\$) \$0.01
	7 Purpose for which amount is received Check if Interest	political contribution	returned to filer
Date	Name of person from whom amount is received		Amount (\$)
	Purpose for which amount is received	political contribution	returned to filer
Date	Name of person from whom amount is received		Amount (\$)
	Purpose for which amount is received	political contribution	returned to filer
Date	Name of person from whom amount is received		Amount (\$)
	Purpose for which amount is received	political contribution	returned to filer
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED			